

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date:: 11/09/01

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: PRACTICAL IN VITRO SIALYLATION OF  
RECOMBINANT GLYCOPROTEINS

Attorney Docket Number:: 019957-011211US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: James  
Middle Name:: C.  
Family Name:: Paulson  
Name Suffix::  
City of Residence:: Del Mar  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 209 Torrey Pines Terrace  
City of Mailing Address:: Del Mar  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 92014

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Middle Name:: J.  
Family Name:: Bayer  
Name Suffix::  
City of Residence:: San Diego  
State or Province of Residence:: CACA  
Country of Residence:: USUS  
Street of Mailing Address:: 6105 Dirac Street  
City of Mailing Address:: San Diego  
State or Province of mailing address:: CACA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 92122

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Eric  
Middle Name::  
Family Name:: Sjoberg  
Name Suffix::  
City of Residence:: San Diego  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 12639 Crest Knolls Court  
City of Mailing Address:: San Diego  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 92130

#### **Correspondence Information**

Correspondence Customer Number:: 20350

#### **Representative Information**

Representative Customer Number:: 20350

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Divisional of	09/007,741	01/15/98

#### **Foreign Priority Information**

Country::	Application number::	Filing Date::
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#### **Assignee Information**

Assignee Name::  
Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::